

## DOE - MLE010

Local Education Agency - LEA						
Local Code	Local Code Description	MOD	National Code	National Code Description	MOD 1	MOD 2
X0201	PHYSICAL THERAPY (PT) EVALUATION		97001	PHYSICAL THERAPY EVALUATION		
X0202	PT W/LICENSED PHYSICAL THERAPIST		97110	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION AND FLEXIBILITY	GP	
X0203	PT PROGRAM		97530	THERAPEUTIC ACTIVITIES, DIRECT (ONE ON ONE) PATIENT CONTACT BY THE PROVIDER (UNSE OF DYNAMIC ACTIVITIES TO IMPORVE FUNCTIONAL PERFORMANCE) EACH 15 MINUTES	HM	
X0204	PT PROGRAM - GROUP		97150	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS), 15 MINUTES		
X0205	OCCUPATIONAL THERAPY (OT) EVALUATION		97003	OCCUPATIONAL THERAPY EVALUATION		
X0206	OT W/LICENSED OCCUPATIONAL THERAPIST		97110	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION AND FLEXIBILITY	GO	
X0207	OT PROGRAM		97530	THERAPEUTIC ACTIVITIES, DIRECT (ONE ON ONE) PATIENT CONTACT BY THE PROVIDER (UNSE OF DYNAMIC ACTIVITIES TO IMPORVE FUNCTIONAL PERFORMANCE) EACH 15 MINUTES	HM	
X0208	OT PROGRAM - GROUP		97150	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS) 15 MINUTES		
X0209	SPEECH, HEARING, & LANGUAGE (SHL) THERAPY EVALUATION		92506	EVALUATION OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AUDITORY PROCESSING, AND/OR AURAL REHABILITATION STATUS		
X0210	SHL THERAPY W/LIC THERAPIST		92507	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; INDIVIDUAL	GN	
X0211	SHL THERAPY PROGRAM		92507	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; INDIVIDUAL		
X0212	SHL THERAPY PROGRAM - GROUP		92508	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PRCESSING DISORDER; GROUP, TWO OR MORE		
X0213	RESIDENTIAL PLACEMENT - SPECIAL ED		T2048	BEHAVIORIAL HEALTH; LONG-TERM CARE RESIDENTIAL, WITH ROOM AND BOARD, PER DIEM		
X0215	CASE MANAGEMENT - NON-MEDICAL		X0215	CASE MANAGEMENT - NON-MEDICAL		
X0216	PERSONAL CARE ATTENDANT		S5125	ATTENDANT CARE SERVICES; PER 15 MINUTES		
X0217	DAY PROGRAM SERVICES - SPECIAL ED		H2018	PSYCHOSOCIAL REHABILITATION SERVICES, PER DIEM		

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X0220	TRANSPORTATION SERVICES - SPECIAL ED		T2003	NON-EMERGENCY TRANSPORTATION; ENCOUNTER/TRIP		
X0221	NURSING SERVICES - SPECIAL ED - PER HALF HOUR UNIT		T1002	RN NURSE SERVICE/15 MINUTES		
X0222	INDIVIDUAL SESSION W/ GUIDANCE COUNSELOR, 20-30 MINUTES		H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	U1	
X0222	INDIVIDUAL SESSION W/ GUIDANCE COUNSELOR, 20-30 MINUTES	JB	H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	U1	HA
X0223	MD,PSYCHOLOGIST,SW,GUIDANCE COUNSELING, GROUP COUNSELING SESSION 20-30 MINUTE SESSION		96153	HEALTH AND BEHAVIOR INTERVENTION, EACH 15 MINUTES, FACE-TO-FACE; GROUP (2 OR MORE PATIENTS)		
X0223	MD,PSYCHOLOGIST,SW,GUIDANCE COUNSELING, GROUP COUNSELING SESSION 20-30 MINUTE SESSION	JB	96153	HEALTH AND BEHAVIOR INTERVENTION, EACH 15 MINUTES, FACE-TO-FACE; GROUP (2 OR MORE PATIENTS)	HA	
X0226	ASSISTIVE TECHNOLOGY DEVICE		E1399	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS		
X0227	ASSISTIVE TCHNOLOGY SERVICE ( 20-30 MINUTE SESSION )		97535	SELF CARE/HOME MANAGEMENT TRAINING DIRECT ONE ON ONE CONTACT BY PROVIDER, EACH 15 MINUTES		
X0229	CHILD OUTREACH SCREENING		T1023	SCREENING TO DETERMINE THE APPROPRIATENESS OF CONSIDERATION OF AN INDIVIDUAL FOR PARTICIPATION IN A SPECIFIED		
X0239	CHILD OUTREACH RE-SCREENING		T1023	SCREENING TO DETERMINE THE APPROPRIATENESS OF CONSIDERATION OF AN INDIVIDUAL FOR PARTICIPATION IN A SPECIFIED	TS	
X0521	SPECIAL ED - CHILD MENTAL HEALTH PHYSICIAN - ASSESSMENT MINIMUM 1 1/2 HOURS		90802	INTERACTIVE PSYCHIATRIC DIAGNOSTIC INTERVIEW EXAMINATION USING PLAY EQUIPMENT, PHISICAL DEVICES, LANGUAGE INTERPRETER, OR OTHER MECHANISMS OF COMMUNICATION		
X0523	S/B 20-30 MINUTE VISIT, PSYCHIATRIST INDIVIDUAL COUNSELING		H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES		
X0523	S/B 20-30 MINUTE VISIT, PSYCHIATRIST INDIVIDUAL COUNSELING	JB	H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	HA	
X0525	SPECIAL ED - CHILD MENTAL HEALTH PSYCHOLOGIST - ASSESSMENT, MINIMUM 1 1/2 HOURS		H0031	MENTAL HEALTH ASSESSMENT, BY NON-PHYSICIAN	AH	
X0527	S/B 20-30 MINUTE VISIT PSYCHOLOGIST INDIVIDUAL COUNSELING		H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	AH	
X0527	S/B 20-30 MINUTE VISIT PSYCHOLOGIST INDIVIDUAL COUNSELING	JB	H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	AH	HA

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X0529	SPECIAL ED - CHILD MENTAL HEALTH SOCIAL WORKER/ PSYCHIATRIC NURSE - ASSESSMENT, MINIMUM 1 1/2 HOURS		H0031	MENTAL HEALTH ASSESSMENT, BY NON-PHYSICIAN	AJ	
X0531	20-30 MINUTE VISIT, INDIVIDUAL COUNSELING		H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	AJ	
X0531	20-30 MINUTE VISIT, INDIVIDUAL COUNSELING	JB	H0004	BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	AJ	HA
X0650	MEDICAL CASE MANAGEMENT - SPECIAL EDUCATION, PER 1/2 HOUR UNIT		X0650	To Be Eliminated		

<b>MOD</b>	<b>Description</b>
AH	Clinical Psychologist
AJ	Clinical Social Worker
GN	OP Speech Language Service
GO	OP Occupational Therapy Service
GP	OP Physical Therapy Service
HA	Child/Adolescent Program
HM	Less than Bachelor Degree Level
TS	Follow-up Service
U1	Medicaid Care Level 1 State Defined

**Note:** In June 2006, the GP modifier will be added to 97530 - PT Program and 97150 - PT Program Group. And the GO modifier will be added to 97530 - OT Program and 97150 - OT Program Group. You will be notified when this change occurs.